

1947



2007



Woodrow Wilson
Rehabilitation Center

**WOODROW WILSON
REHABILITATION
CENTER
FISHERSVILLE, VA.**

**WOODROW WILSON
REHABILITATION CENTER**
ESTABLISHED 1947

60 Years of Excellence

**2007
Annual Report**

WWRC Directors Today and Yesterday



Our Current Director Richard L. "Rick" Sizemore

Rick has been recognized for his role as a leadership coach in the Agency's Skills for Leadership Program helping "developing leaders" improve their skills. Additionally, he is recognized for his efforts in developing the marketing program at WWRC, improving the facilities infrastructure, establishing the WWRC Campus Police Department and for his efforts in the renewal process at WWRC, which included the involvement of staff in the articulation of the Center's Mission and Shared Values. Most importantly, Rick is focused on continuing to partner with the Field Rehabilitation Services Division of the Department of Rehabilitative Services to provide services for agency clients.

Before becoming Center Director, he worked as Deputy Director 2005-2006, Facilities Director for Capital and Physical Plant Services 2003-2005. He was promoted in 2000 to Operations Manager responsible for admissions and assisting the Director. Promoted to Night Administrator of WWRC in 1988 and for the following twelve years he was the leader for all evening operations including dorms, security, recreation, counseling, and medical services. Rick began his career as a therapist for the Center in 1986.

Of Rick's contributions to the Center, his integral involvement in the development of the Center's four major specialty areas is of particular note. The Center's specialty areas are Services to Youth in Transition, Neuro-rehabilitation Services, Assistive Technology Services, and Comprehensive Evaluation and Assessment Services. He is a member of the Executive Board of the National Consortium of State Operated Comprehensive Rehabilitation Centers. He completed the Advanced Leadership Studies through the Institute for Educational Leadership's Collaborative Leader's Program. His undergraduate degree is from Radford University in Music Therapy, and was later Registered with the National Association of Music Therapy and Board Certified as an RMT-BC. Rick has an Associate Degree in Radio/Television Broadcasting from Wilkes Community College.

He lives in Swoope, Virginia with his wife Christa and four children, Katelyn, Hannah, Derick, and William. He is a member of Mt. Tabor Lutheran Church and he enjoys guitar, farming, and upholstering furniture.

Rick is the 9th Director of WWRC.



2004—2007 Richard S. Luck Ed.D.

Dr. Luck is Associate Professor Emeritus in Rehabilitation Counseling, Department of Rehabilitation Counseling, Virginia Commonwealth University and Clinical Associate Professor in Rehabilitation Medicine, School of Medicine, Virginia Commonwealth University.

Formerly, Dr. Luck was Associate Professor and Vice Chairman of the Department of Rehabilitation Counseling, School of Allied Health Professions on the Medical College of Virginia campus of Virginia Commonwealth University. He received the Bachelor of Arts degree in 1966 from the University of Richmond with majors in Psychology and Sociology. He completed the Master of Science in Rehabilitation Counseling at Virginia Commonwealth University in 1968, and in 1975, he obtained the Doctor of Education degree from the University of Virginia in counseling and counselor education.

Judith K. Ashley 1992—2003

Before becoming director of WWRC, Mrs. Ashley held the following positions at the Center: Rehabilitation Program Assistant Director/Chief of Staff 1989 - 1992; Program Supervisor, Vocational Evaluation Department 1985 - 1989; Counselor, Work Adjustment program 1982 - 1985.

Prior to moving back to Virginia, she held the following positions at the Talking Leaves Job Corps Center in Cherokee Nation of Oklahoma in Tahlequah, Oklahoma between 1978 and 1981: Director of Education & Training; Vocational Training Supervisor ; Counselor.

She also held positions as a Court Services Worker and Child Welfare Worker with the Department of Social Services in Ft. Worth, Texas. She has worked as a Juvenile Probation Officer and Probation Officer in Richmond, Virginia.





1990—1992 Paul A. Lavigne

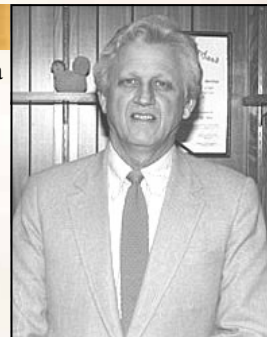
Prior to joining the Center, Mr. Lavigne was a Health Systems Specialist with the public mental health system in Washington, D.C. His responsibilities included management and service integration of a psychiatric hospital, a nursing home, a residential program, three community health centers and an emergency walk-in program.

He has served as a management consultant with the Mental Health Systems Reorganization Office and the State Health Programs Division of Washington, DC. and several hospitals. He also served as administrator of long-term care with the Commission of Public Health in D.C. and as assistant director of the Rochester General-Hospital in Rochester, N.Y.

Lavigne has a B.S. Degree and a Master's Degree in Industrial Engineering from Cornell University.

Kenneth L. Kuester 1980—1989

A native of Baltimore, Md., Mr. Kuester had 19 years of rehabilitation experience which began in Virginia in 1961 when he was a rehabilitation counselor for the Department of Vocational Rehabilitation in Alexandria. In 1962, he joined the Maryland agency where he served in a similar capacity until 1966 when he was promoted to supervisor of field operations in charge of the statewide service delivery program. Mr. Kuester's primary responsibility was the recruitment of qualified professional staff for the Division of Vocational Rehabilitation, a division of Maryland's Department of Education. He was also the liaison for the affirmative action and recruitment of persons with disabilities for the division of vocational rehabilitation. Prior to his rehabilitation career, he taught school in Spotsylvania County and served in the U.S. Army.



1974—1980 J. Ellis Moran

Mr. Moran was a native of Pulaski County and graduated from Dublin High School and received a B.S. Degree from Virginia Polytechnic Institute and State University in 1960.

Prior to joining the Woodrow Wilson Rehabilitation Center, Ellis was the fiscal director of the Department of Vocational Rehabilitation since 1972. He had been business manager of the Radva Plastics Corporation, Radford. He was appointed director of buildings and grounds for Radford College in 1964; was named the college's business manager in July 1966; and was promoted Vice President for Administration in August 1969. Mr. Moran was city engineer for the city of Radford from August 1962 to December 1963. He was a member of the National Rehabilitation Association; he was President of the Radford Chamber of Commerce and a previous member of the board of directors, Radford Red Cross.

Otho H. Smith 1966—1974

Mr. Smith was a native of Hanover County and a graduate of Henry Clay High School. He was a U.S. Army Veteran of World War II.

Before becoming director of WWRC, Mr. Smith was a teacher in Powhatan County and, executive officer and coordinator of the physical medicine and rehabilitation department at the Veteran's Administration Hospital at Salem for two years. He held the same position at the Hampton VA Medical Center in Hampton from 1953 until 1964.

He was also chief of manual arts therapy and assistant executive officer of the physical medicine and rehabilitation division at McGuire Veterans Hospital in Richmond for seven years and was co-author of several technical publications.



1948—1966 Frank O. Birdsall

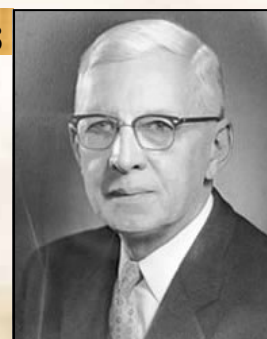
Mr. Birdsall was born on September 17, 1903 in Dinwiddie County, VA. He was married and had one son and, subsequently, two grandchildren. He attended Tinkling Spring Presbyterian Church in Fishersville, VA. He received an A. B. Degree from the College of William & Mary in 1927.

He worked as the District Supervisor, Vocational Rehabilitation, Virginia State Department of Education 1945 - 1948; Principal, Valley Vocational Technical School, Fishersville, VA 1948. He was also a member of the Board of Directors, Zuni Training School, Zuni, VA and the Presbyterian Home, Lynchburg, VA from 1967 - 1974. At the time of his death, he was engaged in farming at his home in Afton, VA. The Center's medical building bears his name in honor of his many significant achievements during his 18-year tenure as Director.

W. Kuhn Barnett 1947—1948

Mr. Barnett accumulated a total of 30 years of dedicated service as a member of the staff of Vocational Rehabilitation and the Department of Education. He was named the first director of the Center on July 11, 1947, and served in this capacity until he returned to the Department of Education in 1948. Mr. Barnett received an A. B. Degree from Case University, and earned a Master's Degree at Columbia University. Except for a leave of absence as an officer in the Anti-Aircraft Arm of the U. S. Army Artillery during World War II, Mr. Barnett made Virginia his home.

Mr. Barnett was instrumental in obtaining a transfer of the Woodrow Wilson General Hospital to Virginia, with a portion of the facility to become a Center to serve the disabled. Today's greatly expanded program at WWRC rests on the solid foundation laid down by Mr. Barnett.



Vocational Training begins

1947

WWRC opens

First Client Enrolled

1948

Lillian Pennell, first quadriplegic at WWRC



1960

WWRC Foundation established

1964

First client dormitory opens: Barnett Hall

1969



After World War I, thousands of wounded Americans returned home searching for an opportunity to become useful, productive citizens. Congress responded by creating the Veterans' Rehabilitation Service. This resulted in a demand for a similar service to civilians.

The 1920 Virginia General Assembly established a vocational rehabilitation program just a few months prior to the passage of the first Federal Vocational Rehabilitation Act. The new federal law was signed by President Woodrow Wilson and was designed to promote the vocational rehabilitation of persons disabled in industry or otherwise and their return to civil employment. It applied only to people with physical disability; covered only guidance, training, provision of artificial appliances and job placement; and initially was in effect on a year-to-year basis. The same year, Virginia's Governor, Westmoreland Davis, issued a proclamation accepting the provisions of the Federal Act and in 1922 the General Assembly enacted legislation providing for the acceptance of these provisions.

From the 1920's through the early 1930's, Richard N. Anderson, Director of Vocational Rehabilitation for the Virginia State Board of Education; one secretary; three emergency caseworkers, and one part-time field assistant were the only rehabilitation staff in the entire state. In 1935 five rehabilitation workers became regular employees. In 1937, W. Kuhn Barnett was added to Mr. Anderson's professional staff as a special assistant. Special Education and Adult Education were added to the program in 1938.

When war was declared in 1941, speedy production of military essentials became a necessity. As many able-bodied individuals were in the armed forces, a large number of workers had to be recruited from the ranks of those with disabilities. The rehabilitation service organized employment clinics for people with disabilities in some parts of the state, resulting in more growth in its services.

Mr. Anderson attended many children with disability clinics conducted by the State Department of Health with Dr. Roy M. Hoover, an orthopedic surgeon of Roanoke. Together they discussed the possibility of a place providing service after surgery where amputees and other people with orthopedic disability could live and obtain physical restoration and preparation for employment in accordance with the individuals' capabilities. It became a dream of Mr. Anderson, Mr. Barnett, Dr. Hoover and others, notably Corbett Reedy, State Supervisor, to secure such a facility.

In January of 1946, while Mr. Barnett was studying and observing the work at the Institute for the Crippled and Disabled in New York (now the New York University School of Medicine), it was discovered that the Woodrow Wilson General Hospital, located in Fishersville, was to be declared surplus. The War Assets Administration agreed to transfer the property to the state. It was first offered to the Department of Health for a hospital for people with tuberculosis with an adjoining section devoted to rehabilitation; this department decided the cost of reconditioning would be prohibitive. Governor Tuck, still interested in the property being

History Of WWRC Development

1973

**First VA
Wheelchair Games**

1974

**First Ms. Wheelchair
Virginia crowned:
Chris Lambruscatti**



1984

**First Transition from
School to Work grant
in Virginia**



2005

**Accessible Trails
Project starts**



2007

**60th Anniversary
of WWRC**



acquired by the state, asked Mr. Barnett how it could be used for educational and rehabilitation purposes. He presented a formal proposal which suggested the following services to be provided: vocational counseling and guidance, therapy treatment under medical supervision, training opportunities, a sheltered workshop, training in the use of prosthetic appliances, and speech training and psychiatric treatment in cooperation with the University of Virginia Medical Department.

Shortly thereafter, while Mr. Barnett was at the Governor's office, a representative from the Augusta County School Board was also in Richmond to request the use of part of the Woodrow Wilson General Hospital for a public school. The two together developed and presented a plan for the building to be divided into three sections; one for the rehabilitation center, one for a vocational school and one for a secondary school. This plan was submitted to the War Assets Administration after which a delay ensued. Unable to understand the reason for this delay, Mr. Barnett traveled to Washington to discover that this office had "never heard of such a thing as a rehabilitation center." He convinced the federal medical representative in an hour's time that the idea was a worthy one.

The property was acquired and divided, and the first state-owned and operated comprehensive rehabilitation center in the nation became a reality. Woodrow Wilson's name had been given the army hospital and later the rehabilitation center. Not only was he born in nearby Staunton; but, more significantly, he had signed into law for the first time in the country's history a rehabilitation program of national scope.

Woodrow Wilson Rehabilitation Center (WWRC) opened on November 1, 1947 and Mr. Barnett was appointed Director of the Center, and the first student was enrolled November 3, 1947.

In the years after 1947 it became generally recognized that rehabilitated individuals were paying back in taxes far more than was invested in service enabling them to become self-supporting; therefore, Congress continued to pass important additional legislation affecting the type provided by WWRC.

During its 60-year history, the Woodrow Wilson Rehabilitation Center has provided services to more than 71,295 people with disabilities to help them learn the skills necessary to gain employment and live independently; and the Center's comprehensive programs and services provide responsive, coordinated, and flexible consumer-directed services that meet the diverse needs of students and clients.

As a leader in the field of medical and vocational rehabilitation, WWRC is proud of its record and proud that its successes have served as a template for establishment of eight other comprehensive rehabilitation centers across America. Today, as through its history, the Center is dedicated to returning people with disabilities to an autonomous life in their communities.



076686732

SENATE JOINT RESOLUTION NO. 501

Offered February 12, 2007

Commending the Woodrow Wilson Rehabilitation Center.

Patrons-- Hanger; Delegate: Landes

WHEREAS, in November 2007, the Woodrow Wilson Rehabilitation Center in Fishersville will mark its 60th anniversary of service to the Commonwealth; and

WHEREAS, founded in 1947, the Woodrow Wilson Rehabilitation Center was named after President Woodrow Wilson, who signed into law the first federal Vocational Rehabilitation Act, which established the state/federal system of rehabilitation services in 1920; and

WHEREAS, the Woodrow Wilson Rehabilitation Center has established an enviable record of success in assisting Virginians with disabilities to live independent, rewarding, and productive lives; and

WHEREAS, the Woodrow Wilson Rehabilitation Center is the only state-owned and operated comprehensive rehabilitation facility in Virginia and one of only nine in the country; and

WHEREAS, during its 60-year history, the Woodrow Wilson Rehabilitation Center has provided services to more than 71,295 people with disabilities to help them learn the skills necessary to gain employment and live independently; and

WHEREAS, the Woodrow Wilson Rehabilitation Center's comprehensive programs and services provide responsive, coordinated, and flexible consumer-directed services that meet the diverse needs of students and clients; and

WHEREAS, the Woodrow Wilson Rehabilitation Center draws substantial support from volunteers, over 275 of whom contributed over 59,750 hours of service through 2005; and

WHEREAS, the Woodrow Wilson Rehabilitation Center is a division of the Department of Rehabilitative Services and is an invaluable resource for its consumers; and

WHEREAS, the Woodrow Wilson Rehabilitation Center is highly regarded as a community partner in assisting persons with disabilities in Staunton, Waynesboro, Augusta County, and adjacent communities, and

WHEREAS, Woodrow Wilson Rehabilitation Center is recognized as the "Premier Rehabilitation Community" in Virginia serving people with disabilities through its centers of excellence, including Youth in Transition, Neuro-Rehabilitation, Comprehensive Diagnosis and Assessment, and Assistive Technology Services and Products; and

WHEREAS, the Commonwealth of Virginia's workforce has greatly benefited from competent, qualified, and well-prepared workers with disabilities who graduated from the Woodrow Wilson Rehabilitation Center; now, therefore, be it

RESOLVED by the Senate, House of Delegates concurring, That the General Assembly hereby commend the Woodrow Wilson Rehabilitation Center on the occasion of its 60th anniversary; and, be it

RESOLVED FURTHER, That the Clerk of the Senate prepare a copy of this resolution for presentation to the Woodrow Wilson Rehabilitation Center as an expression of the General Assembly's respect and admiration for its exemplary record of service to the citizens of the Commonwealth.



076700376

HOUSE JOINT RESOLUTION NO. 897

Offered February 12, 2007

Commending the Woodrow Wilson Rehabilitation Center.

Patrons-- Landes; Senator: Hanger

WHEREAS, in November 2007, the Woodrow Wilson Rehabilitation Center in Fishersville will mark its 60th anniversary of service to the Commonwealth; and

WHEREAS, founded in 1947, the Woodrow Wilson Rehabilitation Center was named for President Woodrow Wilson, who signed into law the first federal Vocational Rehabilitation Act, which established the state/federal system of rehabilitation services in 1920; and

WHEREAS, the Woodrow Wilson Rehabilitation Center has established an enviable record of success in assisting Virginians with disabilities to live independent, rewarding, and productive lives; and

WHEREAS, the Woodrow Wilson Rehabilitation Center is the only state-owned and operated comprehensive rehabilitation facility in Virginia and one of only nine in the country; and

WHEREAS, during its 60-year history, the Woodrow Wilson Rehabilitation Center has provided services to more than 71,295 people with disabilities to help them learn the skills necessary to gain employment and live independently; and

WHEREAS, the Woodrow Wilson Rehabilitation Center's comprehensive programs and services provide responsive, coordinated, and flexible consumer-directed services that meet the diverse needs of students and clients; and

WHEREAS, the Woodrow Wilson Rehabilitation Center draws substantial support from volunteers, over 275 of whom contributed over 59,750 hours of service through 2005; and

WHEREAS, a division of the Department of Rehabilitative Services, the Woodrow Wilson Rehabilitation Center is a valuable resource for its clients; and

WHEREAS, the Woodrow Wilson Rehabilitation Center is highly regarded as a community partner in assisting persons with disabilities in Staunton, Waynesboro, Augusta County, and adjacent communities; and

WHEREAS, the Woodrow Wilson Rehabilitation Center is recognized as the "Premier Rehabilitation Community" in Virginia serving people with disabilities through its centers of excellence, including Youth in Transition, Neuro-Rehabilitation, Comprehensive Diagnosis and Assessment, and Assistive Technology Services and Products; and

WHEREAS, the Commonwealth of Virginia's workforce has greatly benefited from competent, qualified, and well-prepared workers who have graduated from the Woodrow Wilson Rehabilitation Center; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the General Assembly hereby commend the Woodrow Wilson Rehabilitation Center on the occasion of its 60th anniversary; and, be it

RESOLVED FURTHER, That the Clerk of the House of Delegates prepare a copy of this resolution for presentation to the Woodrow Wilson Rehabilitation Center as an expression of the General Assembly's respect and admiration for its exemplary record of service to the citizens of the Commonwealth.



Vocational Evaluation

Vocational Evaluation (VE) first appeared in professional literature in 1947 (Thomas, 1996), coinciding with the birth of Woodrow

Wilson Rehabilitation Center (WWRC) that same year. In the 60 years that followed, WWRC became a leader in the field of rehabilitation and vocational assessment evolved into a core, integral program at the Center.

WWRC's original services included vocational training, physical restoration, counseling, and recreation. In 1957, VE was added in the form of psychological testing and was incorporated into the Counseling Department. The psychologist was employed to do testing relative to the vocational planning of the students and during the early years this procedure was referred to as vocational diagnosis. During the following years, a greater number of students began coming for this vocational diagnosis due to a greater statewide emphasis on an evaluation prior to selection of an actual training program. Actual tryouts in the training areas were added to the psychological testing in a type of on-the-job evaluation. In 1963, an evaluation laboratory containing work samples was established, creating a new rehabilitation concept (Cashatt, 1981). Consequently, WWRC's VE Department became nationally recognized as a pioneer in work sample development.

In 1964, Vocational Rehabilitation in Virginia became its own agency, separate from the Department of Education. On the Federal level, in 1965, "behavior disorders" and "functional retardation" were added to the list of disabilities making a person eligible for rehabilitation, and extended evaluation was permitted (Cashatt, 1981). As a result, in 1966 a Work Adjustment program was added at WWRC that worked in conjunction with the VE program. Through the 1960s, the program continued to evolve with medical evaluation, psychological testing, and orientation to the nature of the work performed in a vocation integrated into the

evaluation process. In 1969, John Cook began his employment at the Center in the VE Department. He is currently the "senior" statesman of the program still evaluating clients as a member of the substitute hourly Evaluator pool.

Just as the 1977 fourth edition of the Dictionary of Occupational Titles (DOT) spanned the 80s until revised in 1991, the VE Department remained remarkably stable in terms of personnel, work samples, and assessment strategies during this time period. However, changes were to come with the arrival of the desk-top computer, the Americans with Disabilities Act (ADA) of 1990, and assistive technology.

Today, the Vocational Evaluation at WWRC offers an extensive array of assessment service options designed to respond to referring counselors' specific questions and clients' individual accommodation needs. Program options include: Feasibility interviews, Fast track evaluations, Skills Assessments, and Work Sample evaluations. The in-house developed work sample evaluation option is a unique career exploration offering that provides hands-on work experiences in over 25 job cluster areas (i.e. Trades, Business, Information Technology, Health, Services, etc.). The program is continually updating work samples and reengineering service options (i.e. final report format was redesigned this past year to a table format with identified core job elements, specific related tasks, and skill summaries related to each work sample explored by the individual). The program served 1,048 clients in FY'07 (including all initial PERT clients) specializing in comprehensive assessment services for the most complex individuals with disabilities served by the Department of Rehabilitative Services.

The future of occupational assessment offers enormous promise as technological advances present greater opportunities for individuals with disabilities in the new world of work. Legislation (i.e. 1992 and 1998 Amendments to the Rehab Act) will continue to impact the profession bringing "informed customer choice" to the forefront. Communication technology will increase information flow and even the workplace itself will be increasingly replaced by a cybernetics work space. In this new paradigm, VE's expertise will be increasingly utilized and valued for optimal inclusion of individuals with disabilities in workforce development.



Employment and Occupational Skills Training

offers careers in Auto Mechanics, Materials Management, Health Occupations, Food Service, Building Trades, Drafting, Business Information and Technology and External Training Options. Employment Skills Training and Educational Support Services are also provided to our students. The most significant change in the past year is the implementation of our Distance Education program (TRAIN IT) associated with our Business and Information Technology (BIT) program.

Besides the on-site classes offered at WWRC, qualifying students may take classes online at home or within local businesses. Students are learning more and have a broadened base of information to help them be successful in their chosen career field. As always, we are constantly reviewing, updating and upgrading our training programs to meet industry standards.



Vocational Training



Post Secondary Education Rehabilitation and Transition (PERT)

As one of the most important transition assessment resources in the state, PERT continues a legacy of twenty plus years of service to Virginia's youth with

disability. PERT served 512 teens in fiscal year 2007. Among those served 451 students were involved in their first assessment and were guided through vocational evaluation, independent living and social/leisure assessments. Sixty-one additional students were provided support and guidance while attempting trial training in one of the vocational training areas suggested by prior PERT evaluation. PERT expanded services to offer access to all Local Educational Areas (LEA) in Virginia; this increased the number of PERT sites from 114 to 132. Ninety-four percent of school districts in the state participated by actually sending students in FY 2007.

Many PERT initiatives in this year have resulted in providing better customer service. PERT Field staff

modified service delivery to improve efficiency and reduce travel costs. PERT Field Staff in the Northern and the Eastern regions have been out stationed to improve service delivery to localities. Having a staff member living in the region they serve has strengthened the program's relationship with these areas and reduced expenses related to travel. PERT Pre-Admission Review (PAR) allowed for more individualized planning. This led to 71 students being admitted to the PERT program that may have been denied in the past. Of those 71 PAR students, 66 successfully completed their programs. The PERT intake process was reorganized to more expediently move students into the program. The PERT Summary Completion report was streamlined to make it more usable for stakeholders. The School and Parent/Guardian Satisfaction Surveys were redesigned by the PERT Advisory Committee and have been implemented. Significant efforts were made to improve cooperation and communication with the Virginia Department of Education (DOE). A DOE grant was accepted for new local PERT team member training that occurred at Woodrow Wilson Rehabilitation Center in November of 2007.






Medical Services

Brain Injury Services at WWRC

The Brain Injury Services Department (BIS) at WWRC has been in operation for 30 years. It currently provides post-acute rehabilitation services to persons with acquired brain injury who demonstrate rehabilitative and vocational potential. Initial comprehensive outpatient evaluation guides development of individualized recommendations and interventions for each client. Trans-disciplinary evaluation and treatment services are provided by medical rehabilitation providers in the areas of physical medicine, neuropsychology, cognitive therapy, speech-language pathology, physical therapy, occupational therapy and vocational counseling. When appropriate, vocational assistance or training is provided through training programs at WWRC and/or in conjunction with selected training sites in the community. The initial outpatient evaluation occurs over the course of one to two days, whereas rehabilitation services received through the BIS program extend over longer time frames depending upon specific client needs and goals. Successful participation in a BIS service program yields increased knowledge, abilities and use of compensatory strategies for enhanced social/family/community participation, improved independent living skills and employment.

Communications




The Communication Services Department provides a full range of both Audiology and Speech-Language Pathology Services. The department began with one speech therapist in 1949, and was established as a department in 1956. Currently, there is one full time audiologist, three speech-language pathologists, and a speech-language assistant. All staff are fully licensed and certified in their professions.

Audiology services include full hearing evaluations, assessment of middle ear function, hearing aid evaluations, and auditory processing evaluations, as well as hearing aid orientation and consultation regarding hearing and hearing disorders.

Speech-Language Pathology services include a full range of speech, language, voice, and swallowing evaluations and therapy. These services are available to students who have communication difficulties that affect their vocational potential – including stuttering, voice, and interpersonal communication. Special expertise is maintained in the areas of

stroke and brain injury rehabilitation, and evaluations and training for use of augmentative communication devices and systems.

Nursing and Supported Living Services



Nursing at WWRC was initially implemented under an "Infirmity Care" concept in 1948. As the student enrollment increased, it became necessary to have nursing staff available 24 hours a day, seven days a week. By 1949, we had progressed into a two ward facility with the capacity for 8 female and 12 male patients. It was during this time that 3 nursing aides who had received training at WWRC were hired. As the client census increased, more wards were opened and staffing grew to include RN, LPN and attendant staff. The importance of nursing staff working with the therapies as part of the rehab team was recognized. In the late 1960's the concept of a "nurse therapist" was utilized with nurses carrying a caseload of five to six clients with whom they worked regularly on a one-to-one basis to improve their level of independence and educate family members. By the mid seventies the new Birdsall-Hoover Medical building was opened with two nursing units dedicated to the specialization of Spinal Cord, Stroke and Brain Injury rehabilitation. After many years as an inpatient rehabilitation hospital, in 1996, the inpatient hospital units were closed and a new shift in care delivery to outpatient residential care began. Presently, clients residing on campus and participating in a WWRC program who need assistance with their personal care are housed on the Dorm/ Supported Living Services Unit. This housing option is temporary as we look forward to the full renovation of the Birdsall-Hoover Medical Unit with 38 beds in the spring in 2009.

WWRC also has a team of Physicians, Ancillary services (Lab, Pharmacy and X-ray) and Psychology department to provide comprehensive Medical Rehabilitation services.



Occupational Therapy (OT)

Occupational Therapy was founded upon the wonderful idea that engaging individuals in occupational activities replete with meaning and purpose, is essential to the development and restoration of health and function. The work of the WWRC OT department has reflected this ideal since its inception in 1947. Following WWII, WWRC occupational therapists specialized in peripheral nerve injuries and prosthetic training for injured veterans returning from the war in order to foster their function and independence. Since then, our treatment methods, utilization of technology and clientele have broadened and become much more diverse; yet the emphasis on function and quality of life has remained. Today, that emphasis is evident in all facets of the WWRC OT department. WWRC therapists continue to address the performance of basic activities of daily living and independent living skills. In addition, WWRC is committed to the utilization of new technologies. Examples include the use of computer assisted therapy

such as the ELINK Evaluation and Exercise System and cutting edge orthotics such as the SaeboFlex orthosis to combat the effects of motor impairment following traumatic or acquired brain injury. WWRC therapists are also highly skilled in assessing and training individuals in the use of assistive computer technology, such as voice recognition, low vision software, alternative computer controls, e.g. sip/puff quadjoy, ergonomic keyboards, and more. Electronic Aides to Daily Living (EADL) evaluations and training are also provided to enable individuals with profound motor dysfunction to access their environment, such as using voice activation systems to make phone calls and operate appliances. OT provides driver's training for individuals with disabilities who have been identified as having the potential to be safe drivers. Another therapeutic innovation is the utilization of a facility dog for Animal Assisted Therapy (AAT). For the past 60 years, through the use of these and other treatment applications, the WWRC occupational therapy department has had a profoundly positive impact upon the quality of life, function and independence of thousands of Virginians.



Physical Therapy (PT)

Physical Therapy (PT) at WWRC began with therapists treating injured soldiers arriving from the WWII battlefields. The long hallways of the former Army hospital were the "training grounds" for persons learning to use wheelchairs, long leg braces or artificial limbs. Young men with their therapists worked to rebuild strength, heal open wounds and regain mobility. Over the remainder of the 20th century, physical therapy at WWRC continued to serve persons from across Virginia who had suffered traumatic injuries to the spinal cord but also began to see a growing number of persons with stroke and traumatic brain injury. Toward the end of the century, we began serving more youth with disabilities due to congenital disorders such as cerebral palsy, spina bifida or muscular dystrophy. Advances in wheelchair technology exploded in the late 80's and 90's with the introduction of lightweight, adjustable manual wheelchairs to replace the standard heavy stainless steel chairs and programmable power wheelchair electronics and power seating

systems. We continued into the 21st century to serve the needs of persons with Spinal Cord Injury, stroke, brain injury, amputations, orthopedic/pain disabilities and other neuromuscular conditions. Advancements in rehabilitation technology, along with rapid advances in clinical research focusing on recovery of neural function, are creating a treatment philosophy of hope and possibilities. Functional neuromuscular electrical stimulation (FNS) assisted walking and FNS-assisted lower extremity cycling for persons with lower extremity paralysis are just examples of our efforts to maximize a person's recovery. Therapists are involved in reviewing clinical research, participating with medical university studies and emerging technology research and development to maintain collaborative linkages with other leaders in the field of rehabilitation to ensure that we remain a part of changing the future for all of those we serve.





Rehabilitation Counseling

Following graduation from a Vocational Training Program in June of 1949, Alice Arms, the very first individual to enroll in Woodrow Wilson Rehabilitation Center, accepted employment in the Center's Counseling Department. Thus began a rich tradition of a caring, dedicated and professional rehabilitation counseling staff at WWRC who are central to the Center's mission of providing persons with disabilities, a comprehensive, individualized set of services to realize optimal personal independence and employment.

The staffing of the WWRC Division of Rehabilitation Counseling has had to change numerous times over the years to balance the needs of the organization and the consumers we serve with the demands of competing resources. From five staff members in 1966, the department swelled to 18 rehabilitation counselors in 1972, before stabilizing at the current staffing level of 13 highly experienced and professional rehabilitation counselors.

Although much has changed, much has remained the same. Then, as now, each individual participating in a Vocational or Life Skills Program at WWRC is assigned a professional Rehabilitation Counselor to provide Case Management and vocationally oriented counseling during their period of enrollment. The counselor also functions as a coordinator of services to the student by communicating with the referring counselor in the community prior to the individual's arrival to identify and arrange the services that will be needed. Following enrollment, the counselor follows the student's progress through their program, making adjustments as necessary and collaborating with both the individual client and the referral source to assure a smooth transition back to the community upon completion of services at WWRC.

Included in the Division of Rehabilitation Counseling is Special Populations Services (SPS). SPS began in 1969 as the Deaf Project, Special Populations Services has broadened to include the provision of services to those individuals with hearing impairments, visual impairments and those for whom English is not a primary language. In addition to vocational rehabilitation counseling and case management, SPS provides interpreting services and other techniques to accommodate individual need, access to assistive listening devices, TTY telephone accessibility, Individual academic instruction, video relay and remote interpreting services.

MV, a 45 year old male, was referred to WWRC for furniture assembler training. His story is a great representation of the comprehensive efforts that define the Center. He had no previous work experience, and his primary goal was to gain work skills and to become more self-sufficient. With a primary disability of Aspergers Syndrome, MV was uncomfortable communicating and interacting with others. To assist him with this, his rehabilitation counselor arranged services through the Communication Services Department and Psychological Services. With the help of the Life Skills Transition Program, he became very active in leisure activities, venturing out to engage in horseback riding and skating despite his discomfort with being around other people. He completed training in furniture assembly with some modifications to the task list and successfully completed an internship at a local cabinet shop. MV's ratings on the internship report were very positive. He was able to thoroughly perform the work with attention to detail and increased his work speed with experience. The internship employer offered himself as a job reference for MV. During the course of his program, MV's family relocated out of state. Through close coordination between the WWRC Rehabilitation Counselor and the DRS Field Counselor, an employer was identified in his new community. MV was able to talk to this employer during a team meeting prior to discharge, allowing both parties to answer pertinent questions. After a subsequent interview, MV was hired. He started at \$9.00 per hour and was told that as his performance continued to improve, his wages would increase. MV has reported that he is very appreciative of the services he received at WWRC and is delighted to be gainfully employed in his first full time job.





Residential Services

Residential Services

The Residential Services Division faced many changes and much growth in an effort to exemplify the Center's shared values. Much of this growth can be found in three ongoing programs; Student Government Association (SGA), Behavior Observation and Tracking, and Life Skills Transition Program (LSTP).

Staff advisor, Christy Wagner, and SGA President, Darryl Willis, helped WWRC experience its most active SGA in many years. At monthly meetings, there could be found upwards of fifty students in attendance. In addition we experienced our greatest voter turnout in years.

This year was also a year of collaboration and teamwork. Late last summer Christy Wagner, Ed Tilman, Amanda Sydnor, Bev Swarthout, Linda Tabor, Jody Kruis, Kevin Hunter, Aaron Childs, Zach Cooper, and Ryan Blosser united in an effort to improve Residential Services documentation system. Excited and encouraged by the effort at leadership from within, management offered support for the project and got behind what is now known as the Observation Note. We are finishing our last month of what is being seen as a successful pilot. Some improvements will no doubt need to be made; meanwhile, the change has already created a difference in the way evening staff interact and observe students.

Finally, Julie Snook, LSTP Coordinator, continues to expand the life skills project. In collaboration with the Organizational Development and Quality Assurance Division (OD&QA), Julie is now able to track and measure students enrolled in the program and the outcome from this. This will allow LSTP to continue to demonstrate it's value to WWRC and the community on into the future.

The Life Skills Transition Program (LSTP) began officially in October 2005 as a result of WWRC's renewal process recommendations, namely to restructure and merge the previous Pre-Vocational Training Program and the Independent Living Skills Program into a comprehensive life skills program.

The LSTP is available to all WWRC clients, 18 years old or above, but it mainly targets Youth in Transition. Post-secondary Education Rehabilitation and Transition (PERT) clients, who may be as young as 15 and meet the program criteria, may also receive services as part of a situational assessment.

This program has continually evolved to meet each client's objectively assessed needs with a mission to provide people with disabilities a learning opportunity for an introduction to life skills including independent living, interpersonal skills and employment skills, while supporting goals to enhance an individualized transition plan.

Program goals for LSTP clients include:

1. To improve work readiness which supports a client's ability to secure entry level employment.
2. To improve a client's awareness of personal interactions which may impact employment.
3. To improve functional and personal management skills that increase a client's potential for living more independently.

The LSTP offers a variety of day and evening classes and activities which support the goals of clients fully enrolled in this program. Clients who complete their program may enter a WWRC vocational training program, complete a WWRC Vocational Evaluation, continue their education elsewhere or return to their home community to seek employment.

Classes currently offered include the following: Advocacy, Anger Management, Computer Basics, Cooking/Housing, Employment Skills, Healthy Lifestyles, Hygiene/Room Care, Laundry, Men/Women-in-Transition, Money Management (basic and advanced), Recreation, Self-Esteem, Social Skills and Transportation Education.

At the beginning of 2006, LSTP services were made available to WWRC clients enrolled in a vocational training program. Based on objectively assessed needs, services were offered in conjunction with a client's current programming in order to maximize their learning experience without extending their enrollment. These clients could have access to the classes listed above, as well as courses in Relationships, Independent Leisure Skills and Recreation Therapy.





Administration and Fiscal Support

The Facilities and Operations Division had numerous initiatives and changes occur over the past year. Departments were restructured to improve efficiencies and our operations were evaluated to increase effectiveness. With assistance from OD&QA, an operations plan to guide us in our mission to support the Center's programs was developed and implemented.

Physical Plant Services (PPS) is a centralized organization consisting of Maintenance Trades, Ground Maintenance, Housekeeping, Transportation and Vehicle Management, Surplus Property and Facility Space Management, Energy Management, and Capital Project Administration in support of maintaining a safe and effective environment for clients. Accomplishments during the past year focused on three themes; budget accountability, enhanced efficiency of staff, and reduction in energy consumption.



A Special Projects Coordinator position was established to manage and coordinate maintenance projects. Multi-tasking of Trades Mechanics was implemented. Overtime in all departments has been significantly reduced through improved planning and execution of work. A preventative maintenance plan has been established and implemented. A safety

review of cleaning chemicals utilized by the Housekeeping Department was conducted and the use of "green" products has been implemented, along with tightened inventory control of supplies. A plan was implemented to successfully reduce surplus property located at the Center. Trustee Work Crews supplied by the Department of Corrections were utilized to assist with Center grounds maintenance at minimal cost. An Energy Manager position was established and a \$2,500,000 energy conservation project was completed which resulted in a significant decrease in energy consumption. New roofs were installed on the Carter/Ashley Dormitory, Watson Activities Building, and the Anderson Training Building. Construction of a new underground water and sewer system which will eliminate leakage and high maintenance costs is nearing completion. Renovation of a portion of the Birdsall-Hoover Medical/Administration Building broke ground in early December. Review and updating of PPS policy and procedures was completed.



The Management Support team has received an "extreme makeover" when compared to the team of the past. With a 100% staff turnover the opportunity emerged for a restructure that eliminated 1 hourly position while at the same time taking on Emergency Preparedness duties for the majority of Disability Service Agencies and streamlining the Post Office while maintaining, Risk Management, Workers Compensation, Return to Work and Safety thus making Management Support more effective to the Center.



The Administrative Division provided support functions for the Agency over the past performance year including Medical Records maintenance, Fiscal, Human Resource and Technology functions, Revenue Collections, and Organizational Development and Quality Assurance. Examples of accomplishments of particular note over the past year include: Improved performance and cost efficiencies from Transcriber Services and Billing/Collections contracts; Expanded capability to gather statistical information for Strategic Plan goals, management information and government performance management;

Expanded teleconferencing capabilities serving state agencies & community partners; Adoption/implementation planning for an Integrated Case Management System (AWARE), Medical Charge Capture incorporating medical documentation, insurance claim data, physician orders, and integration with WWRC's Electronic Document Management System for patient medical records and an internal Financial Management System (FMS); and Initiation of mandated Agency Risk Management Internal Control systems (ARMICS).





Organizational Development and Quality Assurance (OD&QA)



WWRC's Organizational Development and Quality Assurance (OD & QA) Division was created in January, 2007 to create and nurture an organizational culture that supports and reinforces: data integrity; data-driven decisions; demonstration of investment in its employees; strategic pursuit of grants and non-traditional funding sources; and targeted rehabilitation research in partnership with key coalitions and networks.

Major achievements realized during the division's first year of operation include:

Led facility-wide development of FY '08 Division Operation Plans and FY '08 Strengths-Weaknesses-Opportunities-Threats (SWOT) Analysis

Obtained two new federal grant awards on behalf of WWRC for a total amount of \$63,081

Assumed primary leadership for set-up, trouble-shooting, and service coordination of WWRC's use of Video-Conferencing, realizing an annual staff travel and work time cost savings of over \$67,000

Initiated and/or completed WWRC policy development in the following areas: Program Evaluation and Quality Assurance; Grants Development and Management; Research; and, Student Satisfaction

Initiated development of a Written Staff and Organizational Training Plan

Centralized Staff Professional Development and Training funds, with guidelines in development for equitable distribution

Initiated an Agency Committee to examine and make recommendations for WWRC's role and scope in research and development initiatives

Provided ongoing guidance and technical assistance for grants development/management, research proposals, and departmental quality assurance studies



In addition to these accomplishments, during 2007 members of the OD & QA Division served actively on WWRC Teams for final development, training, and implementation of AWARE (Accessible Web-based Activity and Reporting Environment), a major Agency initiative that utilizes web technology to automate essential case management functions for enhanced Agency communication, effectiveness and efficiencies. The OD & QA Division was also asked to facilitate numerous meetings and team processes, including 'Roadmaps to Success' discussions to identify issues and improve employment outcomes for persons served as well as focused topics initiated through WWRC Centers of Excellence and corresponding Design Teams.

The Division is currently leading a Self-Study process for an anticipated audit by the Rehabilitation Services Administration (RSA) of state VR Agencies that have comprehensive rehabilitation centers like WWRC, in collaboration with key Agency partners. Several exciting training initiatives are 'on the horizon' for 2008 based on revised policies, procedures, and priorities of the Agency, including implementation of WWRC's Knowledge Center/Learning Management System and orientation/awareness modules for research, development, and program evaluation/performance measurement.



Volunteer and Service Organizations



The Woodrow Wilson Rehabilitation Center Foundation

The WWRC Foundation was chartered in 1960 and became incorporated in the Commonwealth of Virginia on July 2, 1981. The Foundation is registered with the U.S. Internal Revenue Service as a 501(c)(3) not for profit organization. Governed by a Board of Directors, the Woodrow Wilson Rehabilitation Center Foundation has been instrumental in facility and program development and has played a key role in the construction of new buildings on the WWRC campus including the Harold E. Watson Student Activities Building and the William A. Cashatt Chapel. The most critical role for the Foundation, however, is beginning now and will expand well into the future.

The work of the foundation is twofold:

To provide supplemental funds to assist the WWRC in meeting its annual goals and objectives and

To provide funds for many special projects that are important in the overall operation of the center, but not covered in the operating budget.

Examples of some of these special projects are:

The WWRC trails project which is being constructed almost entirely through gifts and donations. This is a project that is constructing accessible mobility trails around the WWRC Lake and green spaces so that persons with all types of disabilities can enjoy the beauty of the great outdoors.

Support of student accomplishment through the provision of special awards at graduation from WWRC career development and educational programs.

Support of the 60th Anniversary Celebration.

Support to administration for special tours and visitors.

Capital funds for the construction of the Chapel and the Watson recreation building.

Support for staff continuing education programs.



Council of Organizations

The Council of Organizations is a 501(c) 3, non-profit charitable organization governed by a volunteer board established in 1952. The Council consists of a group of individuals who assist the students and staff of the Woodrow Wilson Rehabilitation Center with gifts, moneys and volunteer services.

The Council provided the following to the Center during 2007: funds to the WWRC Chapel Program, operates clothes closet, funds to the Recreation Department to help sponsor special events, funds to send an Occupational Therapist to New York to Facility Dog Training, maintains various accounts for the Trails Project, National Consortium of State Operated Comprehensive Rehabilitation Centers, Garden of Hope, etc.

The current slate of officers for 2008 are: Emigene Tate, President; Virginia Perry, Vice-President; Norma Harris, Treasurer and Wendell Coleman, Secretary.





Ms. Wheelchair Virginia, Inc.

Ms. Wheelchair Virginia is a non-profit organization that focuses on the accomplishments of Virginians with disabilities. The Ms. Wheelchair Virginia program has recently been awarded a grant from AmeriCorps; for more information visit www.americorps.gov. The Ms. Wheelchair Virginia mission is to educate, advocate and raise awareness of the abilities and needs of the disability community in order to influence attitudinal, architectural, and social change for all Virginians. Furthermore, the program's mission is to inspire and motivate Virginians as role models of courage and hope. A female wheelchair user is annually selected as the titleholder to carry out the mission while representing Virginians with disabilities as well as all Virginians. The titleholder has a year long reign speaking at various engagements throughout the state.

The 2007-2008 pageant was held on April 14, 2007 at Woodrow Wilson Rehabilitation Center in Fishersville, Virginia. Buddy Hayes, CTRS (Certified Therapeutic Recreational Specialist) of Chesapeake was crowned Ms. Wheelchair Virginia 2007-2008. Buddy uses a wheelchair due to MS, she is an American Veteran, an accomplished wheelchair athlete, and a national motivational speaker. Buddy's platform is "Sports and recreation for everybody" and her motto is "Desire to Inspire." Congratulations to Buddy on receiving the TODD MULLINS Courage Award for her speech at the 2008 Ms. Wheelchair America pageant on July 28, 2007.



Back row: Virginia Governor Timothy Kaine, Bill Fuller, Richard S. Lock
Front row: "Ellie", Ms. Wheelchair Va Buddy Hayes, Pam Cobler



Student Government Association

The S.G.A. not only sponsors dances, trips, and events, it also listens to student issues and brings them to the Center's Executive Staff so the issue or suggestion can be considered. The S.G.A. solicits suggestions for things to make center life better for everyone and then work on making them a reality.

The S.G.A. is a student run organization, by the student, for the student, with the student in mind.

The S.G.A. strongly supported the STAR Trail project at the Center with



significant contributions in money and volunteer labor. From the matching grant to clearing debris, WWRC students made it happen.



Student Government Association Officers for the Fall term 2007
Seated: Darnell Allen, President, Darnell Harris, Sergeant at Arms
Standing: D. to R: Cindy Guibet, Secretary, Amanda Davis, Treasurer, Chris Owens, Vice President

The WWRC Alumni Association



The Alumni Association had its 34th Reunion in August 2006. The reunion was attended by nearly 100 members, many of which attended the Center from the 1940's through the 1980's. The alumni agreed to contribute \$800 to the 60th Anniversary Project which was held in November 2007. The Alumni and Student Government Association are investigating the possibility of merging the two organizations.



Mr. John Allen, WWRC 1948 graduate and his wife

WWRC in the News



News Virginian, Special 8-page section. Published Sunday,
November 4, 2007



News Virginian, Published
Saturday, April 28, 2007



News Virginian, Published
Wednesday, December 5, 2007



News Leader, Published Friday, November 9, 2007



News Leader,
Published Wednesday,
September 26, 2007



WWRC to host Wheelchair Games

FISHERSVILLE — The 15th annual Mid-Atlantic Association Wheelchair Games will be at Woodrow Wilson Rehabilitation Center and two other Augusta County locations, Harrisonburg Parks and Recreation. The games are scheduled for April 27 through 29.

More than 50 athletes are anticipated to compete in this year's games. The games are, once again, being conducted primarily at WWRC. The opening event will be at Augusta Medical Center and the basketball games will be played at the Augusta County Recreation Center. Athletes from all along the East Coast and Ohio will compete in basketball, track and field, archery, bowling, swimming and soccer.

The very first Wheelchair Games in Virginia were conducted in 1972 at Woodrow Wilson Rehabilitation Center. Eighty competitors participated in those first games.



News Virginian, Published
Sunday, April 15, 2007



News Leader,
Published
Thursday, July
20, 2006

News Leader,
Published
Friday, April
20, 2007

WWRC in the News



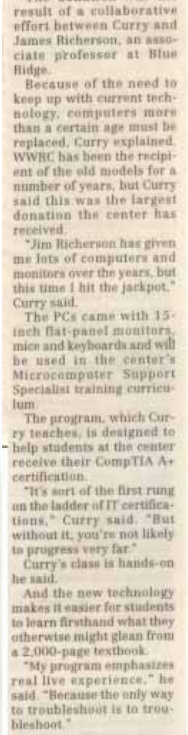
News Virginian, Published Friday, November 9, 2007

News Leader, Published Monday, November 12, 2007



News Virginian, Published Friday, June 22, 2007

News Leader, Published Thursday, October 4, 2006



Dog

Courtesy from the West page

Four-legged therapist brings patient to feet

By Nicole Buchanan

PHOTOGRAPHY — It's no lie, Carlos said. He's the one who brought the dog to the center. Carlos, the black Labrador retriever, is the one who brought the dog to the center. Carlos, the black Labrador retriever, is the one who brought the dog to the center.



Therapist Lasherry takes a break from his job at the Woodrow Wilson Rehabilitation Center. Carlos, the black Labrador retriever, is the one who brought the dog to the center.

PHOTOGRAPHY — It's no lie, Carlos said. He's the one who brought the dog to the center. Carlos, the black Labrador retriever, is the one who brought the dog to the center.

and behavior problems. "You don't even think you're doing therapy," said Lasherry. "You're just being a dog." Carlos, the black Labrador retriever, is the one who brought the dog to the center.

Carlos is always in a state of alertness. He's always in a state of alertness. He's always in a state of alertness. He's always in a state of alertness.



Therapist Lasherry plays a game with Carlos, the black Labrador retriever, at the Woodrow Wilson Rehabilitation Center. Carlos, the black Labrador retriever, is the one who brought the dog to the center.

News Leader, Published Saturday, August 25, 2007



WWRC clients hit their new trail. The new trail is a 1.5-mile loop that winds through the center's grounds. It's a great place for clients to get some exercise and enjoy the outdoors.

WWRC clients hit their new trail

WWRC clients hit their new trail. The new trail is a 1.5-mile loop that winds through the center's grounds. It's a great place for clients to get some exercise and enjoy the outdoors.



Therapist Lasherry plays a game with Carlos, the black Labrador retriever, at the Woodrow Wilson Rehabilitation Center. Carlos, the black Labrador retriever, is the one who brought the dog to the center.

News Leader, Published Wednesday, August 29, 2007

Eighth-graders learn lesson from struggles

Difficulty with simple tasks builds empathy for disabled



WWRC clients hit their new trail. The new trail is a 1.5-mile loop that winds through the center's grounds. It's a great place for clients to get some exercise and enjoy the outdoors.

News Leader, Published Wednesday, December 5, 2007

Lessons



WWRC clients hit their new trail. The new trail is a 1.5-mile loop that winds through the center's grounds. It's a great place for clients to get some exercise and enjoy the outdoors.



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Statistics and Key Measures

CLIENT SERVICES SUMMARY FISCAL YEAR 2007 (JULY 1, 2006-JUNE 30, 2007)

Aggregate Admissions Metrics

| | |
|---|------|
| Number of Admissions to WWRC | 2452 |
| Number of Admissions to Medical Areas | 1051 |
| Number of Admissions in Vocational Area | 1401 |
| Average Daily Census | 252 |

Referral Source

| | |
|---------------------|-------|
| DRS Field Counselor | 74.4% |
| Physician | 5.6% |
| Social Worker | 2.6% |
| All Other | 17.4% |

Admissions by Residential Requirement

| | |
|---------------------------------|------|
| Medical Outpatient | 1128 |
| Medically Supported Residential | 123 |
| Dormitory Vocational | 1097 |
| Community Day Student | 104 |
| Total | 2452 |

Summary by Service Area

| | |
|-----------------------|------|
| Health Services | 1051 |
| Vocational Evaluation | 546 |
| PERT | 492 |
| Brain Injury | 44 |
| All Other Vocational | 319 |

Gender

| | |
|--------|-------|
| Female | 40.7% |
| Male | 59.3% |

Primary Disability at Admission

| | |
|--------------------------------------|--------|
| Cognitive Impairments | 41.57% |
| Mobility Orthopedic and Neurological | 27.08% |
| Psycho-social Impairments | 11.42% |
| Disability TBD by WWRC | 11.01% |
| Other Physical Impairments | 3.88% |
| Deaf and Hearing Impairments | 2.19% |
| Communication Impairments | 1.47% |
| Blind and Visual Impairments | 0.69% |
| All other Impairments | 0.69% |

Ethnicity

| | |
|------------------|-------|
| African American | 263% |
| Caucasian | 70.8% |
| All Other | 2.9% |

Age at Admission

| | |
|----------|-------|
| Under 18 | 16.5% |
| 18 to 22 | 30.9% |
| 23 to 30 | 10.5% |
| 31 to 40 | 9.8% |
| Over 40 | 32.3% |

2005-2006 Employment Outcome Highlights:

74% of graduates were employed at one-year post-exit from WWRC training programs.
Average hourly rate for graduates was \$8.31.
Average number of hours worked per week was 35.

2005-2006 Certification/Licensure Rate Highlight:

Aggregate Across On-Site and Distance Learning Training Programs through the Woodrow Wilson Center for Employment: 91.57%

2005-2006 GED Pass Rate :

100% (n=8 GED tests attempted, all 8 passed)

Note: study cohorts represent students served in 2005-2006 school year, which is most current data available.

2006-2007 Aggregate Satisfaction Data:

Client Satisfaction Rates (completely or somewhat agree):

The purpose for my coming to WWRC was achieved: 89.2%
I was involved in making choices about my program: 87.2%
The staff was helpful: 91.4% (n=734)
I would recommend WWRC to others: 83.5%

Sponsor Satisfaction Rates:

Overall Satisfaction Rate for WWRC Case Management Services: 97.7% were completely or somewhat satisfied
Overall Satisfaction Rate for Usefulness of Report Recommendations: 97.1%
Overall Satisfaction Rate for Timeliness of Reports: 98.2%

2006-2007 Life Skills Transition Program Data:

A satisfaction survey was developed and implemented in January 2007. This year's survey results include six months of data on clients who were fully enrolled in LSTP from January 1, 2007 to June 30, 2007. Program satisfaction information was gathered from 48 of the 68 client's during the last week of their program. The survey was designed to measure the client's satisfaction with the program. Of the 68 eligible clients 13% (9) terminated their program before completion and 16% (11) did not complete a survey.

The Clients' responses to the survey are:

83% reported the LSTP helped them achieve their goals,
92% reported they got what they need from LSTP quickly, and
94% reported they would recommend LSTP to others.



Woodrow
Rehabilitation Center



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Center Director:
Richard L. Sizemore

WWRC is a Division of the Virginia
Department of Rehabilitative
Services

DRS Commissioner:
James A. Rothrock